

Deconstructing the Earliest Warning Signs of Intimate Partner Abuse: Why are the Earliest Warning Signs So Hard to See?

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CITATION: Nunn, L. (2023). *Deconstructing the earliest warning signs of intimate partner abuse: Why are the earliest warning signs so hard to see?* [Conference Session]. StopDV Conference, Hobart Tasmania.

The Earliest Warning Signs of Intimate Partner Abuse Research Project was a qualitative study of abusive heterosexual relationships where the perpetrator was male which was the foundation of my PhD. The focus of this presentation is on why the earliest warning signs (EWS) are so hard to see. The timeframe of the earliest part of the relationship in this study was defined as the first 12 months.

I use the term partner abuse, or intimate partner abuse, rather than domestic violence. I believe the term domestic violence reinforces the myth that this is a phenomenon that occurs only within a person's home and that it is physically violent in nature. Words matter, and we need to be using a term that accurately reflects what we are talking about.

There are two parts of the research findings: the first is an experience I've called 'the tremor' and I will overlay this onto the polyvagal theory; the second refers to the themes of EWS that developed from the interviews. I will use a case study to demonstrate how these findings appear in real life and explain the ways the layers of disguise are stopping women from seeing the EWS. Prevention recommendations based on these findings will be made in the conclusion.

The Tremor and the Polyvagal Theory

The tremor describes behaviours of the perpetrator that caused unease or an intense gut feeling response for victim-survivors, but these behaviours were not labelled as the earliest warning signs of abuse. I use the term 'the tremor' to reflect the warning it provides of an earthquake of abuse to come because the behaviours that caused unease increased in severity and frequency over the course of the relationship. Every interviewee experienced the tremor in the first 12 months of the relationship.

The polyvagal theory provides an understanding of how and why the tremor occurs. The polyvagal theory is a more recent and detailed explanation of how humans respond physiologically when we are exposed to traumatic events. This is a brief summary of polyvagal theory to demonstrate the connection. It was developed by Stephen Porges (2007) and describes the workings of the vagus nerve. Vagus means vagrant or wandering because this series of nerves is long, originating in the brain stem, and travelling through the neck, into the chest and the abdomen. It carries signals and

sensory information between the nervous system and the major organs. It's responsible for the cardiovascular, respiratory, and digestive systems, and it also manages our responses to alarms of danger. It does this by putting our system into one of three states.

The first state is the social engagement state, also called the ventral vagal state, and that is where people feel safe and can have relationships of reciprocity. When the alarm is triggered a person might go into a fight or flight state, also called the sympathetic nervous system state, and that is when they are mobilised and ready for action. And if that state is not available to them, for some reason they can't fight or flight the danger, they will enter the freeze or immobilised state. This is also called the dorsal vagal state and is where they shut down, dissociate, or play dead. According to Porges (2007), a person can only be in one of these states at a time. This system can be trained by chronic exposure to traumatic events to be stuck in one of those states more often than any of the others.

Another concept within the polyvagal theory is neuroception. This is like perception but with the nervous system not our senses. Our nervous system is constantly auto-scanning the environment for cues of danger, looking inside the body, outside in the environment, and in our interactions with others. This happens below our conscious awareness. The detection of danger can be felt by things like your hair standing on end, getting a gut feeling, or an intuition that something feels wrong. The detection of danger does not automatically raise the alarm and put the system into fight, flight, or freeze. It can just cause the gut feeling response.

The neuroception of danger causes the tremor. What was not clear when analysing the results of my study is why the participants' neuroception was picking up the EWS of partner abuse and causing the tremor however, it did not set off the alarm and encourage them to fight or flight the relationship. What appears to have occurred is that women have been physiologically programmed to tolerate this gut feeling response due to chronic exposure to microaggressions throughout our lifetimes from men using subtle abusive behaviours. This starts when young girls are in a playground and their skirt blows up and all the boys laugh. They get that gut feeling response that causes them to feel unsafe and they learn that this is something we have to learn to live with. As my daughter says, "We've learned to ignore our Spidey sense".

I will share a quote from a series called *The Power* to demonstrate these microaggressions. In this series women up to the age of 25 have evolved to have the power to generate electricity in their fingertips. Obviously, it is a make-believe story! But with that power they can defend themselves or they can attack people, and it is as if they are carrying this weapon with them at all times. One of the characters, Jos, is describing to her mother what it feels like to live with this power:

I went for a run and I lost track of the time and it got dark. Instead of rushing, I just walked home in the pitch black...I run with my earbuds in now. And I don't put my keys between my fingers just in case. I don't make elaborate plans with my friends just to make sure we all get home from a party safe...I didn't even realise I was living in constant fear.

Can you imagine what it's going to be like for Izzy [my little sister]? She's not going to look at the ground when a guy passes by. And she's never going to worry about what she's wearing. Can you imagine growing up with that kind of freedom? (Character Jos talking to her mother about what it's like to live with her evolved electrical power. From "The Power" (Prime Video) S1 E5).

This highlights those microaggressions that women live with on a daily basis. We do not give these actions a second thought when we are making those decisions all of the time. It is this exposure to microaggressions that has trained women physiologically to tolerate the tremor.

The Domains of Earliest Warning Signs

The second set of findings from the research were three domains of the EWS of abuse that were identified. The first domain is the fabric of the relationship which incorporates pre-relationship attributes of the perpetrator, early relationship intensity, and traditional gendered beliefs. The prevalent sub-category to which data was most often coded across all the interviews was intense charm, persistence and confidence. This is where women felt a really intense connection to the perpetrator and were swept off their feet.

The second domain is the victim-survivor factors. This describes the vulnerabilities of the victim-survivor including their inexperience in relationships, their desire to escape their situation prior to the relationship, and feeling isolated. The sub-category to which data was coded consistently across all the interviews was internal compromise. This is where women experienced the tremor and were aware that it occurred and chose to suppress their reaction. They made this compromise for a number of what appeared to be good reasons. For example, they did not want to cause conflict in the relationship, or the relationship was going well in other ways, so they made a decision to internally compromise their experience of the tremor.

The third domain was perpetrator tactics which incorporates controlling, threatening, coercive and despotic behaviours. The most prevalent sub-category to which data was most often coded was controlling behaviours, in particular controlling behaviours that stopped a woman living her life or making her own choices. This involved limiting the clothes she wore, her use of finances, or her work choices for example.

Case Study

I will use the case of Frances, a client of my psychology practice, to connect these findings to the real world. Frances was 56 when she came to the practice. She was intelligent, resourceful, and insightful. She went to yoga ashrams in India to do self-development work, which highlights her reflective nature. She was very anxious when she was a child and she explained that this was because her mother had severe mental health issues and would often threaten suicide and run away from the family.

She met her partner, Jim, who was also 56, online, and they had been together only six months when she came to my practice. They remained together on and off for seven months while we worked together. Jim had a history of partner abuse that Frances was not familiar with until after she called the police. She called the police because he stood in front of the car and wouldn't let her leave his house. When the police arrived they informed her that he had a long history of domestic abuse and as a result they were determined to apply an AVO. This really distressed Frances and caused her anxiety and depression. She said that life had come to a grinding halt and that is why she sought out my services.

Frances reported many behaviours in the early part of the relationship that had made her feel this unease in her gut. She said, "the red flags started early". She described how Jim said angry racist comments and when she identified the comments as racist, he would get more angry at her for doing so. She said he was often angry and belligerent. They had a phone conversation before they had actually met in person where he became so angry that she hung up on him. A few weeks later he called and apologised and she accepted his apology.

She said he could also be really sweet and charming. He swept her off her feet. She described it as: "we fell hard." There was this instant and intense physical connection that she could not let go of. He told her that she was the love of his life and he took her ring shopping, but nothing further ever happened from that. She was really disappointed because she wanted the fairytale, and she felt that time was running out for her. He often accused her of infidelity and went through her phone and she put these behaviours down to his PTSD and his army service.

The first violent incident involved him pulling the covers off her on the bed and yelling, "You fat f**king whore." He kept "getting in her face" and would not leave. When she tried to push past him to get away he grabbed her in a headlock. She did not call the police on that occasion. At other times he would be curled up in a foetal position, sobbing, until she gave in and did what he wanted. She kept compromising her reaction because she thought it was normal for a man to behave this way.

During a therapy session, Frances would recognise his bad behaviour and decide that she would not see him again. At the following session she would explain that she had

seen him again and was confused and emotional as a result. She explained that he would constantly switch from being “the devil” to making her “feel delicious”. Because of Jim, Frances lost friends, her self-esteem, her safety, and her work. She reported feeling exhausted and traumatised and she could not believe that this was her story. I kept asking myself as her therapist what was stopping this intelligent, capable and resourceful woman from seeing the EWS and keeping them in her head after she left the sessions? It took seven months working with Frances for something to click when she told me it was finally clear to her.

I believe that the layers of disguise stopped Frances from recognising the EWS. To address this we have to retrain the physiological, the psychological, and the sociological systems of victim-survivors to help them have clarity. From a physiological programming perspective we have a trained polyvagal system that is picking up the tremor but not setting off the alarm. Not being able to identify the tremor as the EWS of abuse is problematic. As one of the interviewees who worked in the domestic abuse sector while she was living with partner abuse explained, “it doesn’t look like you would expect in real life”.

The perpetrator tactics used by Jim were phenomenal. As I said, Frances was convinced in each session that she was not going to see him again, and within a week she would come back to the next session and say, “I’ve started seeing him again and I can see all his positives again.” Perpetrators are master manipulators. Frances experienced victim-survivor factors in the form of the abandonment that she felt from her mum from a very young age. Sometimes these relationships are fantastic and women appear to be grasping at the fruit of those good parts of the relationship, even while the whole world is falling out from underneath them. They are hanging onto those good experiences.

Frances was sold the fairytale that is a key component of the socialisation of women. She had learned to be submissive. Like other women, she learned to refrain from conflict and decision-making. She knew to internally compromise her own needs and feelings and give other people time for theirs. She normalised her partner’s behaviour. The feeling of being swept off her feet and the intense connection that she felt with Jim are common experiences reported by victim-survivors. The more I work with women who live with abuse, the more I start to think that this intense feeling may actually be our nervous system telling us to move away from the relationship rather than move towards it. Women have been told in every movie, every tv show we see, that being swept off our feet is romantic and positive in a relationship.

All of these layers of disguise make identifying the EWS of intimate partner abuse and keeping them in our heads whilst we are still being exposed to it, almost impossible. And as my primary supervisor Dr. Romy Winter said recently, “the onerous task of recognition has been underestimated. Survivors are blameless for not identifying the earliest warning signs of intimate partner abuse.”

Prevention Recommendations and Conclusion

My prevention recommendations are that we need to make the images of the earliest warning signs more relatable and recognisable. They do not look like someone standing over another person yelling at them. They look like a beautiful relationship with some moments that feel bad. Women already hold the power of the tremor. All of the women in the interviews felt the tremor. Women need to learn how to recognise it and what to do with it when it's happening. Challenging the socialisation of women needs to be incorporated into current prevention programs rather than focus solely on addressing masculinity. The socialisation of women is laying a foundation that perpetrators are able to manipulate to reinforce their strategies.

We have underestimated the importance of individual and small group work with women. This needs to occur wherever women meet, in workplaces, in sporting environments, wherever they gather. One of my interviewees used the term "laying seeds," and that is exactly what needs to happen. This is complex and deep work. Frances had been with Jim for 6 months and it took me 7 months to assist her to recognise the abusive behaviours and get clarity. That was one-on-one sessions with a smart, intelligent, capable, high socio-economic status woman. This is hard work and we need to train everyone who is working with women individually and in small groups to be able to do this type of work. I know that my colleagues, who are psychologists, are not given this kind of training, and we need to have more of that.

Finally, gender equity is only one piece of the prevention story. We have to retrain the physiological, the psychological, and the sociological layers as well. It's not a one-size-fits-all.

References

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